

Affidavit and Revenue Certification

10734  
④

Lone Pine Fire Protection District

ENTITY NAME

Evangeline Parish

St Landry, LA (City), State

**ANNUAL SWORN FINANCIAL STATEMENTS AND  
CERTIFICATION OF REVENUES \$50,000 OR LESS (if applicable)**

The annual sworn financial statements are required by Louisiana Revised Statute 24:514 to be filed with the Legislative Auditor within 90 days after the close of the fiscal year. The certification of revenues \$50,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(l)(1)(c)(i).

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Personally came and appeared before the undersigned authority, Dale P. DeSelle (officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Lone Pine Fire Protection District (entity name) as of June 30, 2015 (entity's year-end), and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements.

(Complete if applicable)

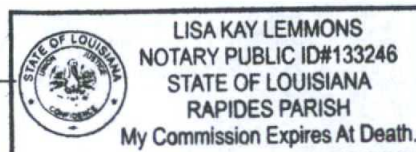
In addition, Dale P. DeSelle (officer name), who, duly sworn, deposes and says that Lone Pine Fire Protection District (entity name) received \$50,000 or less in revenues and other sources for the year ended June 30, 2015, and accordingly, is not required to have an audit for the previously mentioned year.

Dale P. DeSelle

Officer Signature

Sworn to and subscribed before me this 10<sup>th</sup> day of August, 2015.

Lisa Kay Lemmons  
NOTARY PUBLIC



Officer's Name Dale P. DeSelle

Officer's Title Secretary/Treasurer

Address 1099 Edmond Road

St Landry, LA 71367

Ph/Fax/E-mail 318-448-3550/318-448-4236/LonePineFPD@gmail.com

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the entity and other appropriate public officials. The report is available for public inspection at the Baton Rouge office of the Legislative Auditor and, where appropriate, at the office of the parish clerk of court.

Release Date SEP 02 2015

Please return the completed form within 90 days of your entity's year-end to Office of Legislative Auditor –  
Local Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397

## Statement A

Lone Pine Fire Protection District (Agency Name)

**Statement of Cash Receipts and Disbursements**  
**For the Year Ended June 30, 2015 (Year-End)**

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
<b>RECEIPTS (Provide Brief Description):</b>			
1. <u>Ad Valorem Tax</u>	\$ 23,463	\$	\$ 23,463
2. <u>Insurance Rebate</u>	2,263		2,263
3. <u>Fund Raiser</u>	1,044		1,044
4. <u>Other</u>	459		459
5.			
6. <b>Total receipts</b> (add lines 1 - 5)	<u>\$ 27,229</u>	<u>\$</u>	<u>\$ 27,228</u>
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7. <u>Capital Outlay</u>	\$ 17,237	\$	\$ 17,237
8. <u>Debt Service</u>	7,950		7,950
9. <u>Insurance</u>	502		502
10. <u>Maintenance and Repairs</u>	4,470		4,470
11. <u>Other</u>	2,773		2,773
12.			
13. <b>Total Disbursements</b> (add lines 7 - 12)	<u>\$ 37,451</u>	<u>\$</u>	<u>\$ 37,451</u>
14. <b>Change in fund balance</b> (Lines 6 minus 13)	\$ (10,222)	\$	\$ (10,222)
15. <b>Fund Balance at beginning of year</b>	\$ 71,421	\$	\$ 71,421
16. <b>Fund balance (deficit) at end of year</b> (Add lines 14-15) --This amount also goes on line 12, Statement B	\$ 61,199	\$	\$ 61,199

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENTS FOR YOUR RECORDS

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**Statement B**

Lone Pine Fire Protection District (Agency  
Name)

Balance Sheet, on June 30, 2015 (Year-End)

	General Fund	Other Fund	Total
<b>ASSETS</b> (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 48,495	\$	\$ 48,495
2. Investments (fair value) on hand			
3. Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description) <u>Accounts Receivable</u>	13,713		13,713
6. <b>Total Assets</b> (add lines 1 - 5)	\$ 62,208	\$	\$ 62,208
<b>LIABILITIES AND FUND BALANCE</b> (at year-end):			
7. Liabilities (give brief description):			
8. <u>Accounts Payable</u>	\$ 379	\$	\$ 379
9. <u>Accrued Interest Payable</u>	630		630
10.			
11. <b>Total Liabilities</b> (add lines 7 - 10)	1,009		1,009
12. Fund balance (amount from Line 16 on Statement A)	61,199		61,199
13. Other			
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	\$ 62,208	\$	\$ 62,208

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Statement C

Lone Pine Fire Protection District (Agency Name)

**Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer**

Agency Head Name/Title: Jessica Ortega / Chairperson

Purpose	Amount
Salary	
Benefits-insurance	
Benefits-retirement	
Benefits-other (describe)	
Benefits-other (describe)	
Benefits-other (describe)	
Car allowance	
Vehicle provided by government (enter amount reported on W-2)	
Per diem	
Reimbursements	317
Travel	
Registration fees	
Conference travel	
Housing	
Unvouchered expenses (example: travel advances, etc.)	
Special meals	
Other	